

Docket No. 64987-A/JPW/GJG/BJAIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Gabriela Chiosis, Ivo. G. Boneca, and W. Clark Still  
Serial No. : 10/805,624 Examiner: S. Lee  
Filed : March 18, 2004 Group Art Unit: 1624  
For : METHOD FOR RE-SENSITIZING VANCOMYCIN RESISTANT BACTERIA  
USING AGENTS WHICH SELECTIVELY CLEAVE A CELL WALL DEPSIPEPTIDE

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: February 4, 2005

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

       A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For <sup>1</sup>	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	7 -	* 0 =	*** 0 X	\$25	\$50	=	0	
Independent Claims	1 -	** 0 =	*** 0 X	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time Yes <u>X</u> No				\$180	\$360	=	0	
				TOTAL ADDITIONAL FEE			\$ 0	

<sup>1</sup> The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter  
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The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter  
☒ Return Receipt Postcard  
☒ An Information Disclosure Statement, including Form PTO-1449  
(Copies of citations included: Yes ☒ No ☐  
and a fee of \$ \_\_\_\_\_ included)  
☐ A Petition for an Extension of Time, including a fee of  
\$ \_\_\_\_\_ for a Petition for \_\_\_\_\_ Month(s) Extension of Time  
☐ Other (identify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE TOTAL FEE DUE IS \$ 0.

☐ A check in the amount of \$ \_\_\_\_\_ is enclosed.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of  
\$ \_\_\_\_\_.

☒ The Commissioner is hereby authorized to charge any additional fees  
required or credit any overpayment to Deposit Account No. 03-3125  
as follows:

☒ Fees under 37 C.F.R. §1.16 for the presentation of extra claims  
☐ Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

I hereby certify that this  
correspondence is being deposited this  
date with the U.S. Postal Service with  
sufficient postage as first class mail  
in an envelope addressed to:  
Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450.  
Gary J. Gershik 2/4/05  
Gary J. Gershik Date  
Reg. No. 39,992

Gary J. Gershik  
John P. White  
Registration No. 28,678  
Gary J. Gershik  
Registration No. 39,332  
Attorneys for Applicant(s)  
Cooper & Dunham LLP (Customer #23432)  
1185 Avenue of the Americas  
New York, New York 10036  
(212) 278-0400